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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. 00960/138

First Inventor Motoki Ohtani

Title FUEL INJECTION CONTROL APPARATUS OF CYLINDER
INJECTION TYPE INTERNAL COMBUSTION ENGINE

Express Mail Label No.

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
- Applicant claims small entity status.
See 37 CFR 1.27.
- Specification [Total Pages 29]
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (*if filed*)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- Drawing(s) (35 U.S.C. 113) [Total Sheets 3] [Total Pages 1]
- Oath or Declaration
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63 (d))
(for a continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- Application Data Sheet. See 37 CFR 1.76

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

01409 U.S. PTO
10/600762



06/23/03

ACCOMPANYING APPLICATIONS PARTS

- Assignment Papers (cover sheet & document(s))
- 37 C.F.R. §3.73(b) Statement Power of Attorney
(when there is an assignee)
- English Translation Document *(if applicable)*
- Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
- Preliminary Amendment
- Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
- Certified Copy of Priority Document(s)
(if foreign priority is claimed)
- Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
- Other: Claim for Convention Priority

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No: _____ /
Prior application information: Examiner _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label



or Correspondence address below

(Insert Customer Number or Bar Code Label here)

| | | | | | |
|---------|-------------------------|--|-----------|----------|--|
| Name | | | | | |
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| City | | | State | Zip Code | |
| Country | | | Telephone | Fax | |

| | | | | |
|-------------------|-----------------|--|-----------------------------------|--------------|
| Name (Print/Type) | Mark H. Neblett | | Registration No. (Attorney/Agent) | 42,028 |
| Signature | | | Date | 23 June 2003 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2003

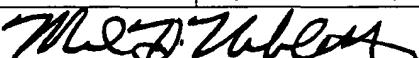
Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
790.00

| Complete if Known | |
|----------------------|----------------|
| Application Number | To Be Assigned |
| Filing Date | Herewith |
| First Named Inventor | Motoki Ohtani |
| Examiner Name | To Be Assigned |
| Group / Art Unit | To Be Assigned |
| Attorney Docket No. | 00960/138 |

| METHOD OF PAYMENT (check all that apply) | | | | FEE CALCULATION (continued) | | | |
|--|--|----------|---|---|---|---------------------|--|
| <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: | | | | 3. ADDITIONAL FEES | | | |
| Deposit Account Number <div style="border: 1px solid black; padding: 2px;">11-0600</div> Deposit Account Name <div style="border: 1px solid black; padding: 2px;">Kenyon & Kenyon</div> | | | | Large Entity | Small Entity | | |
| The Commissioner is authorized to: (check all that apply) | | | | | | | |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. | | | | | | | |
| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING FEE | | | | | | | |
| Large Entity | Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fee Paid | |
| | 1001 | 750 | 2001 | 375 | Utility filing fee | \$750.00 | |
| | 1002 | 330 | 2002 | 165 | Design filing fee | | |
| | 1003 | 520 | 2003 | 260 | Plant filing fee | | |
| | 1004 | 750 | 2004 | 375 | Reissue filing fee | | |
| | 1005 | 160 | 2005 | 80 | Provisional filing fee | | |
| SUBTOTAL (1) | | | | (\$ 750.00) | | | |
| 2. EXTRA CLAIM FEES | | | | | | | |
| Total Claims | <div style="border: 1px solid black; padding: 2px;">12</div> | -20 ** | = <div style="border: 1px solid black; padding: 2px;">0</div> | X <div style="border: 1px solid black; padding: 2px;"> </div> | = <div style="border: 1px solid black; padding: 2px;">0</div> | | |
| Independent Claims | <div style="border: 1px solid black; padding: 2px;">3</div> | -3 ** | = <div style="border: 1px solid black; padding: 2px;">0</div> | X <div style="border: 1px solid black; padding: 2px;"> </div> | = <div style="border: 1px solid black; padding: 2px;">0</div> | | |
| Multiple Dependent | | | | X <div style="border: 1px solid black; padding: 2px;"> </div> | = <div style="border: 1px solid black; padding: 2px;">0</div> | | |
| Large Entity | Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fee Paid | |
| | 1202 | 18 | 2202 | 9 | Claims in excess of 20 | | |
| | 1201 | 84 | 2201 | 42 | Independent claims in excess of 3 | | |
| | 1203 | 280 | 2203 | 140 | Multiple dependent claim, if not paid ** Reissue independent claims over original patent | | |
| | 1204 | 84 | 2204 | 42 | ** Reissue claims in excess of 20 and over original patent | | |
| | 1205 | 18 | 2205 | 9 | | | |
| SUBTOTAL (2) | | | | (\$ 0) | | | |
| Other fee (specify) | | | | | | | |
| *Reduced by Basic Filing Fee Paid | | | | | | SUBTOTAL (3) | |
| (\$ 40.00) | | | | | | | |

**or number previously paid, if greater; For Reissues, see above

| SUBMITTED BY | | Complete (if applicable) | | |
|-------------------|---|----------------------------------|--------|-----------------------------|
| Name (Print/Type) | Mark H. Neblett | Registration No. Attorney/Agent) | 42,028 | Telephone 202-220-4232 |
| Signature |  | | | Date 23 June 2003 |

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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